

Application Information

Applicant Information

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PAGE # 1

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Michael
Family Name:: Kohlmann
City of Residence:: San Francisco
State or Province of Residence:: CA
Country of Residence:: US
Street of mailing address:: 650 Church Street, #5
City of mailing address:: San Francisco
State or Province of mailing address:: CA
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Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Joel
Middle Name:: D.
Family Name:: Medlock
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State or Province of Residence:: CA
Country of Residence:: US
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City of mailing address:: Campbell
State or Province of mailing address:: CA
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Correspondence Information

Correspondence Customer Number:: 38881

Representativ Information

Representative Customer Number:: 38881

Assignee Information

Assignee name:: Infineon Technologies MorphICs, Inc.